

# REQUEST FOR LONG-TERM BUS SCHEDULE CHANGE

I would like to request a change in my child's bus schedule

1. \_\_\_\_\_  
Name Date  
\_\_\_\_\_  
Address School  
\_\_\_\_\_  
Grade

2. Please be as specific as possible about the pick-up and drop-off points that are different from the regularly scheduled bus stop for your child. Include complete addresses where available or a description of the requested bus stop if an address is not available. You may use the back if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. It is my intent that this be a long-term schedule change (for at least 3 months) to begin on:

\_\_\_\_\_ the first day of school **or**

\_\_\_\_\_ on \_\_\_\_\_  
Date

4. \_\_\_\_\_  
Home phone Work phone

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Sample copy only: Actual form is blue and copies are available in the school offices and the Superintendent's Office or you may download from our website.**